Case 08-07537 Doc 1 Filed 03/28/08 Entered 03/28/08 18:15:50 Desc Main

Official Form 1 (10/06) Document Page 1 of 50 United States Bankruptcy Court DISTRICT OF Northern Illinois Voluntary Petition Name of Debtor (if individual, enter Last, First, Middle) Name of Joint Debtor (Spouse) (Last, First, Middle): METZGER, CANDICE All Other Names used by the Debtor in the last 8 years All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names): (include married, maiden, and trade names): Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than one, Last four digits of Soc. Sec./Complete EIN or other Tax I.D. No. (if more than state all): one, state all): Street Address of Debtor (No. and Street, City, and State): Street Address of Joint Debtor (No. and Street, City, and State): 2650 S. ARTESIAN AVE. UNIT 2 CHICAGO, IL 60655 ZIP Code County of Residence or of the Principal Place of Business: County of Residence or of the Principal Place of Business COOK Mailing Address of Debtor (if different from street address) Mailing Address of Joint Debtor (if different from street address): ZIP Code ZIP Code Location of Principal Assets of Business Debtor (if different from street address above): ZIP Code Chapter of Bankruptcy Code Under Which Type of Debtor Nature of Business (Form of Organization) (Check one box.) the Petition is Filed (Check one box.) (Check one box.) Health Care Business Chapter 15 Petition for Chapter 7 ◻  $\mathbf{Z}$ Individual (includes Joint Debtors) Single Asset Real Estate as defined in Chapter 9 Recognition of a Foreign See Exhibit D on page 2 of this form. 11 U.S.C. § 101(51B) Chapter 11 Main Proceeding Corporation (includes LLC and LLP) Railroad Chapter 12 Chapter 15 Petition for Partnership Stockbroker Chapter 13 Recognition of a Foreign Other (If debtor is not one of the above entities, Commodity Broker Nonmain Proceeding check this box and state type of entity below.) Clearing Bank Other Nature of Debts (Check one box.) Tax-Exempt Entity (Check box, if applicable.) ✓ Debts are primarily consumer ☐ Debts are primarily debts, defined in 11 U.S.C. business debts. Debtor is a tax-exempt organization § 101(8) as "incurred by an under Title 26 of the United States individual primarily for a Code (the Internal Revenue Code), personal, family, or household purpose." Filing i ee (Check one box.) Chapter 11 Debtors Check one box:  $\mathbf{Z}$ Full Filing Fee attached. Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). Filing Fee to be paid in installments (applicable to individuals only). Must attach Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. Check if: Debtor's aggregate noncontingent liquidated debts (excluding debts owed to Filing Fee waiver requested (applicable to chapter 7 individuals only). Must insiders or affiliates) are less than \$2 million. attach signed application for the court's consideration. See Official Form 3B. Check all applicable boxes: A plan is being filed with this petition. Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b) Statistical/Administrative Information THIS SPACE IS FOR COURT USE ONLY Debtor estimates that funds will be available for distribution to unsecured creditors. Ø Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. **Estimated Number of Creditors** 50-100-200-1,000-5.001-10.001-25,001-50,001 Over 49 99 199 999 5,000 10,000 25,000 50,000 100,000 100,000  $\Box$ П Estimated Assets \$10,000 to 50 to \$100,000 to □\$1 million to More than \$100 million \$10,000 \$100,000 \$1 million \$100 million Estimated Liabilities **□**450 to \$50,000 to \$100,000 to □\$1 million to ☐More than \$100 million \$50,000 \$100,000 \$1 million \$100 million

Case 08-07537 Filed 03/28/08 Entered 03/28/08 18:15:50 Desc Main Doc 1 Document Page 2 of 50 Official Form 1 (10/06) Form B1, Page 2 Name of Debtor(s): METZGER, CANDICE Voluntary Petition (This page must be completed and filed in every case.) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet. Case Number: Date Filed: Where Filed: Location Case Number: Date Filed: Where Filed Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet.) Name of Debtor District: Relationship: Judge: Exhibit A Exhibit B (To be completed if debtor is an individual (To be completed if debtor is required to file periodic reports (e.g., forms 10K and whose debts are primarily consumer debts.) 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b). Exhibit A is attached and made a part of this petition. Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition:  $\Box$  Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box.) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Statement by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment)

# (Address of landlord)

Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and

Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.

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Official Form 1 (10/06)	Form B1, Page 3
Voluntary Petition	Name of Debtor(s):
(This page must be completed and filed in every case.)	
Signature(s) of Debtor(s) (Individual/Joint)	Signature of a Foreign Representative
Signature(s) or Deotor(s) (Individual/Johnt)	Signature of a Foreign Representative
I declare under penalty of perjury that the information provided in this petition is true and correct.  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11. United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).  I request relief in accordance with the chapter of title 11, United States Code, specified in the petition]  X  Signature of Debtor  Telephone Number (if not represented by attorney)	I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.  (Check only one box.)  I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.  Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.  X  (Signature of Foreign Representative)
Date	Date
Signature of Attorney  X  Signature of Attorney for Debtor(s)  Nahel Ray 4St  Printed Name of Attorney for Debtor(s)  Address  Address  BRIDGENIEW 1 C WOUSS  Telephone Number  BRIDGENIEW 1 C WOUSS  Signature of Debtor (Corporation/Partnership)	Signature of Non-Attorney Bankruptcy Petition Preparer  1 declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.  Printed Name and title, if any, of Bankruptcy Petition Preparer  Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)
I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.	Address
The debtor requests the relief in accordance with the chapter of title 11, United States Code, specified in this petition.	х
X Signature of Authorized Individual	Date
Printed Name of Authorized Individual	Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.
Title of Authorized Individual	,
Date	Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.
	If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.
	A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

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Official Form 6 - Summary (10/06)

	United Sta	tes Bankruptcy Court	
	Northern	District Of Illinois	
In re _	METZGER, CANDICE,	Case No.	
	20001	Chapter 7	

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$0.00		
B - Personal Property	Yes	2	\$99,560.00		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$ 16,320.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	2		\$0	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	2		\$ 38,800.00	-
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			:
I - Current Income of Individual Debtor(s)	Yes	1			\$3,273.22
J - Current Expenditures of Individual Debtors(s)	Yes	1		•	\$2,993.00
TOTAL		13	\$99,560.00	\$ 55,120.00	·

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Official Form 6 - Statistical Summary (10/06)

# United States Bankruptcy Court

	Northern	District Of	Illinois		
 METZGER, CANDIC	<u>E</u> ,		Case No		
Debtor			Chapter	7	•.

## STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) (whether disputed or undisputed)	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E)	\$0.00
Student Loan Obligations (from Schedule F)	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$0

#### State the following:

Average Income (from Schedule I, Line 16)	\$3,237.22
Average Expenses (from Schedule J, Line 18)	\$2,933.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$5,085.42

State the following:

Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$4,320.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$38,800.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$43,120.00

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METZGER, CANDICE			
In re	1	Case No.	
Debtor		(If known)	

#### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim."

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

DESCRIPTION AND LOCATION OF PROPERTY	NATURE OF DEBTOR'S INTEREST IN PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITHOUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION	AMOUNT OF SECURED CLAIM
NONE				
·				
				-
,				
	То	tal>	0.00	

(Report also on Summary of Schedules.)

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In re	METZGER, CANDICE	,	Case No.
•	Debtor		(If known)

#### SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." In providing the information requested in this schedule, do not include the name or address of a minor child. Simply state "a minor child."

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
1. Cash on hand.		Cash on person	w	\$10.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		Checking account at US Bank .	w	\$50.00
3. Security deposits with public utilities, telephone companies, landlords, and others.	x			
4. Household goods and furnishings, including audio, video, and computer equipment.	,	Household furniture located at Debtor's Domicile	w	\$1,000.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	х	,		
6. Wearing apparel.		Clothing located at Debtor's Domicile	w	\$300.00
7. Furs and jewelry.		Jewelry	$ \mathbf{w} $	\$200.00
8. Firearms and sports, photographic, and other hobby equipment.	x			
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.		Term Life Insurance	w	\$86,000.00
10. Annuities, Itemize and name each issuer.	х			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c); Rule 1007(b)).	х			

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Form B6B-Cont. (10/05)

In re	METZGER, CANDICE	, Case No
	Debtor	(If known)

## **SCHEDULE B - PERSONAL PROPERTY**

(Continuation Sheet)

TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	х			
Stock and interests in incorporated and unincorporated businesses.  Itemize.	x			
14. Interests in partnerships or joint ventures. Itemize.	х			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	x			
16. Accounts receivable.			÷	
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	х		:	6
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	х			·
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A — Real Property.	х	,		,
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	х			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	x		•	

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Form B6B-cont. (10/05)

In re	METZGER, CANDICE	,	Case No.	
	Debtor		(If known)	

## **SCHEDULE B-PERSONAL PROPERTY**

(Continuation Sheet)

		(Continuation Sneet)		
TYPE OF PROPERTY	N O N E	DESCRIPTION AND LOCATION OF PROPERTY	HUSBAND, WIFE, JOINT, OR COMMUNITY	CURRENT VALUE OF DEBTOR'S INTEREST IN PROPERTY, WITH- OUT DEDUCTING ANY SECURED CLAIM OR EXEMPTION
22. Patents, copyrights, and other intellectual property. Give particulars.	х			
23. Licenses, franchises, and other general intangibles. Give particulars.	x			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	x			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2006 Chevy Equinox	w	\$12,000.00
26. Boats, motors, and accessories. 27. Aircraft and accessories.	x			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	x			
30. Inventory.	x			·
31. Animals.	x			
32. Crops - growing or harvested. Give particulars.	x	,		
33. Farming equipment and implements.	х			~
34. Farm supplies, chemicals, and feed.	x			
35. Other personal property of any kind not already listed. Itemize.	х			
			al➤	\$99,560.00

(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)

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In re	METZGER, CANDICE	Case No.
	Debtor	(If known)

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:	Check if debtor claims a homestead exemption that exceeds
(Check one box)	\$125,000.

				522(b)(2)
₹	11	U.S.C.	§	522(b)(3)

DESCRIPTION OF PROPERTY	SPECIFY LAW PROVIDING EACH EXEMPTION	VALUE OF CLAIMED EXEMPTION	CURRENT VALUE OF PROPERTY WITHOUT DEDUCTING EXEMPTION
Debtor's Clothing	735 ILCS 5/12-1001 (a)	\$300.00	\$300.00
Household furnishings at Debtors Domicile	735 ILCS 5/12-1001 (b)	\$1,000.00/4,000.00	\$1,000.00
Cash	735 ILCS 5/12-1001 (b)	\$10.00/\$4,000.00	\$10.00
Checking	735 ILCS 5/12-1001 (b)	\$50.00/\$4,000.00	\$50.00
Pension	735 ILCS 5/12-1006	\$4,030.00	\$4,030.00
Chevy Equinox	735 ILCS 5/12-1001 (c)	\$12,000.00/\$2,400.00	\$12,000.00
Life Insurance	735 ILCS 5/12-1001(f)	· ·	\$86,000.00

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Official Form 6D (10/06)

continuation sheets

attached

In re METZGER, CANDICE,	Case No.	
Debtor		(if known)

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H – Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

HUSBAND, WIFE, JOINT, OR COMMUNITY CREDITOR'S NAME AND DATE CLAIM WAS AMOUNT OF CLAIM UNSECURED UNLIQUIDATED CONTINGENT CODEBTOR MAILING ADDRESS WITHOUT PORTION, IF INCURRED, DISPUTED INCLUDING ZIP CODE AND NATURE OF LIEN, DEDUCTING VALUE ANY AN ACCOUNT NUMBER AND OF COLLATERAL DESCRIPTION (See Instructions Above.) AND VALUE OF **PROPERTY** SUBJECT TO LIEN ACCOUNT NO. 154909473391 Car Loan **GMAC** PO Box 2182 W X \$16,320.00 \$4,320.00 Greeley, CO 80632-2182 VALUE \$ 12,000.00 ACCOUNT NO. VALUE \$ ACCOUNT NO.

> VALUE \$ Subtotal ►

Total >

(Total of this page)

(Use only on last page)

(Report also on Summary of Schedules.)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

320,00

\$

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Official Form 6E (10/06)

In re	METZGER, CANDICE,	Case No.
	Debtor	(if known)

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts <u>not</u> entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.

with primarily consumer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data.
Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.
TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)
☐ Domestic Support Obligations
Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).
Extensions of credit in an involuntary case
Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).
Wages, salaries, and commissions
Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,000* per person earned within 180 days immediately preceding the filing of the original petition, or the

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Entered 03/28/08 18:15:50 Case 08-07537 Doc 1 Filed 03/28/08 Desc Main Document Page 13 of 50 Official Form 6E (10/06) - Cont. <u>METZGER, CANDICE</u> Case No. (if known) Debtor Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$4,925\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). Deposits by individuals Claims of individuals up to \$2,225\* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). Taxes and Certain Other Debts Owed to Governmental Units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). Commitments to Maintain the Capital of an Insured Depository Institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). Claims for Death or Personal Injury While Debtor Was Intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10). \* Amounts are subject to adjustment on April 1, 2007, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

0 continuation sheets attached

	Case 08-07537	Doc 1		Entered 03/28/08 18:15:50	Desc Main
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Ín re	METZGER, CAI	NDICE		Case No.	

CHEDIII F F	CDEDITORS HOL	DING HINSECHRED	NONDDIODITY	CT ATM

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112. If "a minor child" is stated, also include the name, address, and legal relationship to the minor child of a person described in Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data...

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F. HUSBAND, WIFE, JOINT, OR COMMUNITY JNLIQUIDATED CREDITOR'S NAME, DATE CLAIM WAS AMOUNT OF CONTINGENT CODEBTOR DISPUTED MAILING ADDRESS **INCURRED AND** CLAIM INCLUDING ZIP CODE, CONSIDERATION FOR AND ACCOUNT NUMBER CLAIM. (See instructions above.) IF CLAIM IS SUBJECT TO SETOFF, SO STATE. ACCOUNT NO. 6035320016558566 Credit Card Home Depot Processing Center \$1,100.00 W X Des Moines, IA 50364-0500 ACCOUNT NO. 5049948101641951 Credit Card Sears \$5,300.00  $\mathbf{X}$ W PO Box 183081 Columbus, OH 43218-3081 ACCOUNT NO. 5421180467480890 Credit Card Citibank \$9,200.00 W X 4600 Houston Rd. Florence, KY 41042 ACCOUNT NO. 4266841098705153 Credit Card Chase Cardmember Service \$1,700.00 X W PO Box 15153 Wilmington, DE 19886-5153 Subtotal> \$17 300.00 \_continuation sheets attached (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)

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In re	METZGER, CANDICE	,	Case No.	
	Debtor		(if known)	

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCOUNT NO. 22490800			Credit Card				
Citibank 4600 Houston Rd. Florence, KY 41042		W			X		\$11,200.00
ACCOUNT NO. 746363977			Credit Card				
Lane Bryant National Bank PO Box 182273 Columbus, OH 43218-2273		w			X		\$800.00
ACCOUNT NO.2007 M1 197730			Judgment				
Household c/o Wexler & Wexler 500 W. Madison Suite 2910 Chicago, IL 60661		W			х		\$9,500.00
ACCOUNT NO.							
•			,				
ACCOUNT NO.							
Sheet no. 1 of 1 continuation sheets attact to Schedule of Creditors Holding Unsecure Nonpriority Claims		<u>l</u>	I		Sub	total➤	\$ 21,500.00
		(Report	(Use only on last page of the also on Summary of Schedules and, if app Summary of Certain Liabi	licable c	ed Sched on the Sta	Γotal➤ lule F.) itistical l Data.)	\$ 21,500.00 \$ 38,800.00

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(10/0)	5)

In re	METZGER, CANDICE	,	Case No.	
	Debtor		(if known)	_

#### SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed.R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.
	·
	,

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#### **SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, indicate that by stating "a minor child" and do not disclose the child's name. See 11 U.S.C. § 112; Fed. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
	·

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	Debtor	=			(if known)	

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by every married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child.

Debtor's Marital	DEPENDENTS OF DEBTOR AND SPOUSE						
Status: Single	RELATIONSHIP(S): Luc	cas Przybyl - Son	AGE(S):	2			
Employment:	DEBTOR		SPOUSE	-			
Occupation	Teacher						
Name of Employer			<del></del>				
How long employed Address of Employ							
Address of Employ	2650 Westmont Vale Chicago, IL 60641						
COME: (Estimate	of average or projected monthly income at time	DEBTOR	SPOUSE				
		\$ <u>4.536.59</u>	\$				
	ges, salary, and commissions	•					
(Prorate if not pa Estimate monthly		\$0.00	\$				
SUBTOTAL		\$4,536.59	<b>\$0</b>				
LESS PAYROLL	DEDUCTIONS	1,,000,00		•			
a. Payroll taxes at		\$574.41	<b>\$</b>				
b. Insurance		\$ <u>104.84</u>	\$				
c. Union dues		\$ <u>69.05</u>	\$				
d. Other (Specify)	:Pension/Deferred Pay	\$ <u>1063.90</u>	\$				
SUBTOTAL OF F	PAYROLL DEDUCTIONS	\$ <u>1812.2</u>	\$ <u>0</u>				
TOTAL NET MO	NTHLY TAKE HOME PAY	<u>\$2,724.39</u>	\$ <u>0</u>				
Regular income fr	om operation of business or profession or farm	\$0,00	\$				
(Attach detailed	statement)	\$0,00	\$				
Income from real p							
Interest and divide	ends nance or support payments payable to the debtor for	\$ <u>0.00</u>	\$				
the debtor's us	the or that of dependents listed above r government assistance	\$ <u>375.50</u>	\$				
(Specify):	- Da . Tarritant donormita	<u>\$ 0.00</u>	\$				
Pension or retirer		\$ <mark>0.00</mark>	•				
Other monthly in			\$				
(Specify): 2nd	d Job	<u>\$ 173.33</u>	\$				
SUBTOTAL OF	LINES 7 THROUGH 13	\$ <u>548.83</u>	\$ <u>0</u>				
AVERAGE MOI	NTHLY INCOME (Add amounts shown on lines 6 and 14)	\$ <u>3,273.22</u>	\$0				
COMBINED AV	ERAGE MONTHLY INCOME: (Combine column totals	\$ <u>3,2</u>	<u>73.22</u>				
from line 15; if there	is only one debtor repeat total reported on line 15)		ry of Schedules and, if applicable of Certain Liabilities and Related				
Describe any inc	rease or decrease in income reasonably anticipated to	occur within the year fo	ollowing the filing of this docume	nt:			

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In reMETZO	GER, CA	ND Recument	Page 19 of 50	Case No		
Debt	tor				(if known)	

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

Complete this schedule by estimating the weekly, quarterly, semi-annually, or annually		ected monthly expenses of the debtor and the debtor's family at time case filed a rate.	. Prorate any payments made bi-
Check this box if a joint petition is f	iled and debtor's	spouse maintains a separate household. Complete a separate schedule of exp	enditures labeled "Spouse."
1. Rent or home mortgage payment (include	lot rented for mol	pile home)	s950.00
a. Are real estate taxes included?	Yes	No	· · · · · · · · · · · · · · · · · · ·
b. Is property insurance included?		No	
2. Utilities: a. Electricity and heating fuel			\$80.00
b. Water and sewer			s 0.00
c. Telephone			\$ <u>95.00</u>
d. Other			s <u>0.0</u> 0
3. Home maintenance (repairs and upkeep)			\$ <u>0.00</u>
4. Food			s <u>600.00</u>
5. Clothing			s <u>150.00</u>
5. Laundry and dry cleaning			\$ <u>25.00</u>
7. Medical and dental expenses			\$ <u>25.00</u>
3. Transportation (not including car payment	s)		<u>\$ 210.00</u>
9. Recreation, clubs and entertainment, news	papers, magazine	s, etc.	\$ <u>50.00</u>
10.Charitable contributions			s <u>0.00</u>
11.Insurance (not deducted from wages or inc	cluded in home m	nortgage payments)	
a. Homeowner's or renter's			s <u>0.00</u>
b. Life			\$ <u>0.00</u>
c. Health			\$ <u>0.00</u>
d. Auto			s <u>118.00</u>
e. Other		<u>.</u>	s <u>0.00</u>
2.Taxes (not deducted from wages or includ Specify)	ed in home morts	gage payments)	\$ <u>0.00</u>
3. Installment payments: (In chapter 11, 12,	and 13 cases, do	not list payments to be included in the plan)	
a. Auto			s <u>340.00</u>
b. Other			\$ <u>0.00</u>
c. Other			\$_0.00
14. Alimony, maintenance, and support paid	to others		\$ <u>0.00</u>
5. Payments for support of additional depen	dents not living a	t your home	\$ <u>0.00</u>
6. Regular expenses from operation of busing	ess, profession, o	or farm (attach detailed statement)	\$ <u>0.00</u>
17. Other School Supplies/Toilet	ries/Student Loan	/Attorney Fees/Cable/Internet	<u>\$350.00</u>
<ol> <li>AVERAGE MONTHLY EXPENSES (To if applicable, on the Statistical Summary</li> </ol>		•	\$ 2,993.00
19. Describe any increase or decrease in expe	nditures reasonal	bly anticipated to occur within the year following the filing of this document:	
20. STATEMENT OF MONTHLY NET INC	СОМЕ		
a. Average monthly income from Line 1;	of Schedule I		<u> 3,237.22</u>
b. Average monthly expenses from Line	18 above		\$3,237,22 \$2,993.00 \$244,00
c. Monthly net income (a. minus b.)			s 244,00

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Document

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Case No. \_ (if known)

## **DECLARATION CONCERNING DEBTOR'S SCHEDULES**

#### DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury summary page plus 2), and that they	that I have read the foregoing summary and schedules, consisting of 14 sheets (total shown on are true and correct to the best of my knowledge, information, and belief.
Date 3 - 26 - 08	Signature: X Cardin Muter
Date	Signature:
	[If joint case, both spouses must sign.]
	TURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)
document for compensation and have under 11 U.S.C. §§ 110(b), 110(h) as setting a maximum fee for services c	that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this e provided the debtor with a copy of this document and the notices and information required and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) hargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum ent for filing for a debtor or accepting any fee from the debtor, as required by that section.
Printed or Typed Name and Title, if any, of Bankruptey Petition Preparer	Social Security No. (Required by 11 U.S.C. § 110.)
If the bankruptcy petition preparer is not an in partner who signs this document.	ndividual, state the name, title (if any), address, and social security number of the officer, principal, responsible person, or
Address  X	
Signature of Bankruptcy Petition Preparer	Date
Names and Social Security numbers of all oth individual:	er individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an
If more than one person prepared this docume	ent, attach additional signed sheets conforming to the appropriate Official Form for each person.
A bankruptcy petition preparer's failure to co- both. 11 U.S.C. § 110; 18 U.S.C. § 156.	nply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or
DECLARATION UNDE	R PENALTY OF PERJURY ON BEHALF OF A CORPORATION OR PARTNERSHIP
I, the	[the president or other officer or an authorized agent of the corporation or a member ship] of the [corporation or partnership] named as debtor perjury that I have read the foregoing summary and schedules, consisting of sheets (total that they are true and correct to the best of my knowledge, information, and belief.
Date	Signature:
	[Print or type name of individual signing on behalf of debtor.]
[An individual sign	ring on behalf of a partnership or corporation must indicate position or relationship to debtor.]
	aling property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Official Form 7 (10/05)

#### UNITED STATES BANKRUPTCY COURT

	•		
	Northern	DISTRICT OF	Illinois
In re: <u>METZ</u>	GER, CANDICE ,	Case No	(if known)
	STATEMEN	NT OF FINANCIAL	AFFAIRS
the information for beinformation for both filed. An individual should provide the ir affairs. Do not incluchildren by stating "Questions must complete Questadditional space is not information."	soth spouses is combined. If the spouses whether or not a joint production debtor engaged in business as a afformation requested on this stands the name or address of a min a minor child." See 11 U.S.C. § 1 - 18 are to be completed by altions 19 - 25. If the answer to	e case is filed under chapter 12 petition is filed, unless the spons sole proprietor, partner, familitement concerning all such action child in this statement. In § 112; Fed. R. Bankr. P. 1007 II debtors. Debtors that are or an applicable question is "Nestion, use and attach a separate	nt petition may file a single statement on which 2 or chapter 13, a married debtor must furnish buses are separated and a joint petition is not ally farmer, or self-employed professional, tivities as well as the individual's personal dicate payments, transfers and the like to minor (m).  have been in business, as defined below, also lone," mark the box labeled "None." If the sheet properly identified with the case name,
		DEFINITIONS	
individual debtor is the filing of this band of the voting or equi self-employed full-ti	"in business" for the purpose of kruptcy case, any of the followi ty securities of a corporation; a time or part-time. An individual	this form if the debtor is or haing: an officer, director, mana partner, other than a limited p debtor also may be "in busin	he debtor is a corporation or partnership. An as been, within six years immediately preceding ging executive, or owner of 5 percent or more partner, of a partnership; a sole proprietor or ess" for the purpose of this form if the debtor ement income from the debtor's primary
their relatives; corpo 5 percent or more of	rations of which the debtor is a	n officer, director, or person is of a corporate debtor and their	the debtor; general partners of the debtor and n control; officers, directors, and any owner of relatives; affiliates of the debtor and insiders
1. Incom	ne from employment or opera	tion of business	<del></del>
None State the g the debtor' beginning	ross amount of income the debt is business, including part-time of this calendar year to the date	tor has received from employs activities either as an employe this case was commenced. S	ment, trade, or profession, or from operation of see or in independent trade or business, from the state also the gross amounts received during the spintains, or has maintained financial records on

AMOUNT 2008 \$10,669.88

2007 \$41,385.37

2006 \$ 17,575.71

spouses are separated and a joint petition is not filed.)

SOURCE

the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the

Chicago Public Schools

Chicago Public Schools

SELLING TUPPERWARE

#### 2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**AMOUNT** 

SOURCE

2008 \$751.00 2007 \$4,728.00 CHILD SUPPORT CHILD SUPPORT

2006 \$0.00

#### Payments to creditors

#### Complete a. or b., as appropriate, and c.



a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 days immediately preceding the commencement of this case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR DATES OF

AMOUNT

STILL OWING

**PAYMENTS** PAID

None 

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case if the aggregate value of all property that constitutes or is affected by such transfer is not less than \$5,000. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATES OF PAYMENTS/ TRANSFERS AMOUNT PAID OR VALUE OF **AMOUNT** STILL OWING

**TRANSFERS** 

None  $\mathbf{Z}$ 

c. All debtors: List all payments made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF

AMOUNT

AMOUNT STILL OWING

AND RELATIONSHIP TO DEBTOR

**PAYMENT** 

PAID

Document

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3

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER

NATURE OF PROCEEDING

COURT OR AGENCY AND LOCATION

STATUS OR DISPOSITION

HOUSEHOLD FINANCE V. CANDICE METZER 07 M1 197730

COLLECTION

FIRST DISTRICT OF COOK COUNTY

JUDGMENT ENTERED ON 11/28/07

None  $\mathbf{V}$ 

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE

DATE OF

DESCRIPTION AND VALUE OF PROPERTY

BENEFIT PROPERTY WAS SEIZED

**SEIZURE** 

#### Repossessions, foreclosures and returns



List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER

DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

#### Assignments and receiverships



a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT TERMS OF ASSIGNMENT OR SETTLEMENT **7** 

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN

NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER

DESCRIPTION AND VALUE Of PROPERTY

4

#### 7. Gifts

Z

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION

RELATIONSHIP TO DEBTOR, IF ANY

DATE OF GIFT DESCRIPTION AND VALUE OF GIFT

#### 8. Losses



List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART

DATE OF LOSS

PROPERTY BY INSURANCE, GIVE PARTICULARS

#### 9. Payments related to debt counseling or bankruptcy

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY \$450.00/\$300.00 (Filing Fees)

Akram Zanayed & Associates 8550 S. Harlem Ste. G Bridgeview, IL 60455

December 18, 2007 / February 29, 2008

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5

None

List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None  $\mathbf{Z}$ 

b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER **DEVICE** 

DATE(S) OF TRANSFER(S)

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S

INTEREST IN PROPERTY

#### 11. Closed financial accounts



List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions: (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE AMOUNT AND DATE OF SALE OR CLOSING

#### 12. Safe deposit boxes



List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS

DESCRIPTION OF

DATE OF TRANSFER OR SURRENDER,

TO BOX OR DEPOSITORY

CONTENTS

IF ANY

				6			
None	the commencement of this case. (M	larried debtors fil	ing under chapter 12 or	osit of the debtor within <b>90 days</b> preceding chapter 13 must include information ess the spouses are separated and a joint			
	NAME AND ADDRESS OF CREI	DITOR	DATE OF SETOFF	AMOUNT OF SETOFF			
	14. Property held for anoth	•					
None Z	List all property owned by another person that the debtor holds or controls.						
	NAME AND ADDRESS OF OWNER	DESCRIPTION VALUE OF		LOCATION OF PROPERTY			
	15. Prior address of debtor						
None	If debtor has moved within <b>three years</b> immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.						
	ADDRESS	NAME USE	)	DATES OF OCCUPANCY			
	2650 S. ARTESIAN AVE		METZGER	11/2006 TO PRESENT			

1553 W. HAWKHAVEN RD. CANDICE METZGER 11/2003 TO 11/2006 HOMER GLEN, IL 60491
16. Spouses and Former Spouses

CHICAGO, IL 60655

UNIT 2

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

Z

#### 17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.



a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS NAME AND ADDRESS OF GOVERNMENTAL UNIT DATE OF NOTICE

ENVIRONMENTAL

7

LAW

None

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS NAME AND ADDRESS
OF GOVERNMENTAL UNIT

DATE OF

ENVIRONMENTAL

NOTICE LAW

None

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

#### 18. Nature, location and name of business



a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within six years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six years immediately preceding the commencement of this case.

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LAST FOUR DIGITS OF SOC. SEC. NO./ **BEGINNING AND** NAME COMPLETE EIN OR ADDRESS NATURE OF BUSINESS **ENDING DATES** OTHER TAXPAYER I.D. NO. b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as 7 defined in 11 U.S.C. § 101. NAME **ADDRESS** The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within six years immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time. (An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.) 19. Books, records and financial statements a. List all bookkeepers and accountants who within two years immediately preceding the filing of this **/** bankruptcy case kept or supervised the keeping of books of account and records of the debtor. NAME AND ADDRESS DATES SERVICES RENDERED b. List all firms or individuals who within two years immediately preceding the filing of this bankruptcy  $\checkmark$ case have audited the books of account and records, or prepared a financial statement of the debtor. NAME **ADDRESS** DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

9

None				ercantile and trade agencies, to whom a ely preceding the commencement of this car
	20.	Inventories		
None	a.	List the dates of the last two in	eventories taken of your property, the na dollar amount and basis of each invento	
		DATE OF INVENTORY	INVENTORY SUPERVISOR	DOLLAR AMOUNT OF INVENTORY (Specify cost, market or other basis)
None		List the name and address of the a., above.	he person having possession of the reco	rds of each of the inventories reported
		DATE OF INVENTORY		NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS
	21		Directors and Shareholders	
None	a.	If the debtor is a partnership, partnership.	list the nature and percentage of partne	ership interest of each member of the
		NAME AND ADDRESS	NATURE OF INTEREST	PERCENTAGE OF INTEREST
None	b.		, list all officers and directors of the cor ontrols, or holds 5 percent or more of the	
		NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
	22	. Former partners, officers, o	directors and shareholders	
None	a.	-	list each member who withdrew from t	the partnership within one year immediatel

ADDRESS

DATE OF WITHDRAWAL

NAME

None

b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

#### 23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

#### 24. Tax Consolidation Group.



If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within six years immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

#### 25. Pension Funds.



If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within six years immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

\* \* \* \* \* \*

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11

[If completed by an individual or indivi	idual and spouse]	
I declare under penalty of perjury that I any attachments thereto and that they a	have read the answers contain re true and correct.	ined in the foregoing statement of financial affairs and
Date 3-24-08	Signature X of Debtor	Cully Milyer
Date	Signature_ of Joint Debto (if any)	for
[If completed on behalf of a partnership or cor	•	
I, declare under penalty of perjury that I have re that they are true and correct to the best of my k	ead the answers contained in the for cnowledge, information and belief.	regoing statement of financial affairs and any attachments thereto an
Date	Signature	
		Print Name and Title
	continuation sheets	
Penalty for making a false statement:	Fine of up to \$500,000 or imprisonm	nent for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571
I declare under penalty of perjury that: (1) I am a loompensation and have provided the debtor with a cost- 342(b); and, (3) if rules or guidelines have been pro-	bankruptcy petition preparer as defi opy of this document and the notice mulgated pursuant to 11 U.S.C. 6 1	RUPTCY PETITION PREPARER (See 11 U.S.C. § 110)  Tined in 11 U.S.C. § 110; (2) I prepared this document for es and information required under 11 U.S.C. §§ 110(b), 110(h), and 10(h) setting a maximum fee for services chargeable by bankruptcy ring any document for filing for a debtor or accepting any fee from ti
Printed or Typed Name and Title, if any, of Bankrup	tcy Petition Preparer	Social Security No.(Required by 11 U.S.C. § 110.)
f the bankruptcy petition preparer is not an individu person, or partner who signs this document.	al, state the name, title (if any), ada	dress, and social security number of the officer, principal, responsib
Address		
X Signature of Bankruptcy Petition Preparer		. Date
Names and Social Security numbers of all other indivinct an individual:	viduals who prepared or assisted in	preparing this document unless the bankruptcy petition preparer is
f more than one person prepared this document, atta	ch additional signed sheets conform	ning to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 18 U.S.C. § 156,

Form 8 Case 08-07537 Doc 1 Filed 03/28/08 Entered 03/28/08 18:15:50 Desc Main

In re METZGER, Candicc.

Case No.

					Chapter	/
СНАРТ	TER 7 INDIN	TDUAL DEB	TOR'S STA	TEMENT OF I	NTENTION	
☐ I have filed a schedule of ass☐ I have filed a schedule of exe☐ I intend to do the following v	cutory contracts :	and unexpired lease	s which include	es personal property of	ubject to an unexpire bject to a lease:	ed lease.
Description of Secured Property	Creditor's Name	Property will be Surrendered	Property is claimed as exempt	Property will be redeemed pursuant to 11 U.S.C. § 722	Debt will be reaffirmed pursuant to 11 U.S.C. § 524(e)	
2606 Chevy Equinox	GMAC				×	]
Dageription of Lensed Property	Lessor's Name	Lease will be assumed pursuant to 11 U.S.C. § 362(h)(1)(A)				
				0 0		
Date: 374-08	·		Sign	Cauling stature of Debtor	mite	<u> </u>
DECLARATIO  I declare under penalty of perjury compensation and have provided th 110(h), and 342(b); and, (3) if rules chargeable by bankruptcy petition public debtor or accepting any fee from the	that: (1) I am a be e debtor with a co or guidelines hav preparers, I have g	ankruptcy petition popy of this document to been promulgate given the debtor no	preparer as defin at and the notice of pursuant to 11	es and information red	0; (2) I prepared this Juired under 11 U.S.	document for .C. §§ 110(b),
Printed or Typed Name of Bankrup If the bankruptcy petition preparer responsible person or partner who s	is not an individu	al, state the name.	Soci litle (if any), ad	al Security No. (Requ dress, and social secu	ired under 11 U.S.C crity number of the o	§ 110.) fficer, principal,
Address	<u></u>					
x		_				
Signature of Bankruptcy Petition P	eparer	- Date				

Names and Social Security Numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

12-01-105 16:21 FROM-

:-234 P012/013 F**-4**81

Case 08-07537

hearings thereof;

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Desc Main

B 203 (12/94)

# **United States Bankruptcy Court**

	NORTHERN Distric	et OfCLINOIS
In	ı re	
	METZGER, CANDICE	Case No.
De	ebtor	Chapter
	DISCLOSURE OF COMPENSATIO	N OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20 named debtor(s) and that compensation paid to me we bankruptcy, or agreed to be paid to me, for services in contemplation of or in connection with the bankr	within one year before the filing of the petition in rendered or to be rendered on behalf of the debtor(s)
	For legal services, I have agreed to accept	<u>1 ≥∞.∞</u>
	Prior to the filling of this statement I have received .	\$ 750.00
	Balance Due ,	\$_550,00
2.	. The source of the compensation paid to me was:	
	Debtor Other (specify)	
3.	. The source of compensation to be paid to me is:	
	Other (specify)	
4.	I have not agreed to share the above-disclosed c members and associates of my law firm.	ompensation with any other person unless they are
	I have agreed to share the above-disclosed comp members or associates of my law firm. A copy of the people sharing in the compensation, is attac	pensation with a other person or parsons who are not of the agreement, together with a list of the names of hed.
5	<ol> <li>In return for the above-disclosed fee, I have agreed case, including:</li> </ol>	to render legal service for all aspects of the bankruptcy
	<ul> <li>a. Analysis of the debtor's financial situation, and to file a petition in bankruptcy;</li> </ul>	rendering advice to the debtor in determining whether
	b. Preparation and filing of any petition, schedules	s, statements of affairs and plan which may be required;
	a. Depresentation of the debter of the meeting of a	beautions and confirmation hearing, and any adjourned

# Case 08-07537 Doc 1 Filed 03/28/08 Entered 03/28/08 18:15:50 Desc Main DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR (Continued)

- d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;
- e. [Other provisions as needed]

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

#### CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.

3-26-08

Date

Signature of Attorney

No -- allow time

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B22A (Official Form 22A) (Chapter 7) (01/08)

In re	METZGER, CANDICE	According to the calculations required by this statement:
	Debtor(s)	☐The presumption arises.
Case Number	;	The presumption does not arise.
	(If known)	(Check the box as directed in Parts I, III, and VI of this statement)

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Joint debtors may complete one statement only.

Part I. EXCLUSION FOR DISABLED VETERANS AND NON-CONSUM	ÆR DEBT	ORS					
If you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the box at the beginning of the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.   Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as							
If your debts are not primarily consumer debts, check the box below and complete the verificate complete any of the remaining parts of this statement.	ion in Part VII	I. Do not					
Declaration of non-consumer debts. By checking this box, I declare that my debts are not	primarily cons	umer debts.					
Part II. CALCULATION OF MONTHLY INCOME FOR § 707(b)(7) EXCLUSION							
Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.							
a. Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.							
are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code."							
c. Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both							
d. Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.							
All figures must reflect average monthly income received from all sources, derived during	Column A	Column B					
the six calendar months prior to filing the bankruptcy case, ending on the last day of the month before the filing. If the amount of monthly income varied during the six months, you must divide the six-month total by six, and enter the result on the appropriate line.	Debtor's Income	Spouse's Income					
Gross wages, salary, tips, bonuses, overtime, commissions.	\$ 4,709.92	\$ ·					
	f you are a disabled veteran described in the Veteran's Declaration in this Part I, (1) check the Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this complete the verification in Part VIII. Do not complete any of the remaining parts of this stater.    Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in while the declare in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activit	Veteran's Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  Veteran's Declaration. By checking this box, I declare under penalty of perjury that I am a disabled veter defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on act defined in 10 U.S.C. § 101(d)(1)) or while I was performing a homeland defense activity (as defined in 32 U.S. f your debts are not primarily consumer debts, check the box below and complete the verification in Part VIII complete any of the remaining parts of this statement.  Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer to the complete only Column A ("Debtor's Income") for Lines 3-11.  All Junmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.  Complete only Column A ("Debtor's Income") for Lines 3-11.  Complete only Column A ("Debtor's Income") for Lines 3-11.  Complete only Column A ("Debtor's Income") for Lines 3-11.  Complete only Column A ("Debtor's Income") for Lines 3-11.  Complete only Column A ("Debtor's Income") for Lines 3-11.  Complete only Column A ("Debtor's Income") for Lines 3-11.  Complete only Column A ("Debtor's Income") for Lines 3-11.  Complete only Column A ("Debtor's Income") for Lines 3-11.  Complete only Column A ("Debtor's Income") for Lines 3-11.  Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.  Column A ("Debtor's Income") and Column B ("Spouse's Income") and Column					

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B22A (C	fficial Form 22A) (Chapter 7) (01/08)			
4	Income from the operation of a business, profession or farm. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 4. If you operate more than one business, profession or farm, enter aggregate numbers and provide details on an attachment. Do not enter a number less than zero. Do not include any part of the business expenses entered on Line b as a deduction in Part V.			
	a. Gross receipts \$			
	b. Ordinary and necessary business expenses \$			
	c. Business income Su	btract Line b from Line a	\$	\$
	Rent and other real property income. Subtract Line b from Line a and enter the difference in the appropriate column(s) of Line 5. Do not enter a number less than zero. Do not include any part of the operating expenses entered on Line b as a deduction in Part V.			
5	a. Gross receipts \$			
	b. Ordinary and necessary operating expenses \$			
	c. Rent and other real property income Su	btract Line b from Line a	\$	<b>\</b> \$
6	Interest, dividends and royalties.		\$	\$
7	Pension and retirement income.		\$	\$
8	Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.		<b>\$</b> 375.50	\$
9	Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9.  However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to be a benefit under the Social Security Act  Debtor \$  Spouse \$			\$
10	Income from all other sources. Specify source and amount. If necessary, list additional sources on a separate page. Do not include alimony or separate maintenance payments paid by your spouse if Column B is completed, but include all other payments of alimony or separate maintenance. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, crime against humanity, or as a victim of international or domestic terrorism.   a. \$ b. \$			
	Total and enter on Line 10		φ.	<b>.</b>
11	Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).		\$ 5,085.42	\$    \$
12	Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.		\$5,085.42	
	Part III. APPLICATION OF	§ 707(b)(7) EXCLUSION		<del></del>
13	Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by 12 and enter the result.			\$61,025.04

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322A (Official Form 22A) (Chapter 7) (01/08)				
14	Applicable median family income. Enter the median family income for the applicable state and household size. (This information is available by family size at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)			
	a. Enter debtor's state of residence: IL b. Enter debtor's household size: 2	\$56,545.00		
15	Application of Section 707(b)(7). Check the applicable box and proceed as directed.  The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presument arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI  The amount on Line 13 is more than the amount on Line 14. Complete the remaining parts of this states	or VII.		

### Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

	J	Part IV. CALCULATION	OF CURRE	ENT N	MONTHLY	INCOME	FOR § 707(b)(2	2)
16	Ente	r the amount from Line 12.						\$5,085.42
17	Line debto paym deper	tal adjustment. If you checked 11, Column B that was NOT pair's dependents. Specify in the lient of the spouse's tax liability endents) and the amount of incomarate page. If you did not check	id on a regular ba nes below the bas or the spouse's su ne devoted to each	asis for sis for upport h purpo	the household excluding the of persons oth ose. If necessa	l expenses of the Column B incomer than the deb	he debtor or the ome (such as otor or the debtor's	
	a.				5	S		
	b.							
	c.				\$	<u> </u>		
	Tota	al and enter on Line 17.						\$0
18	Curr	ent monthly income for § 707(	(b)(2). Subtract I	Line 17	from Line 16	and enter the	result.	\$5,085.42
	Natio	Subpart A: Deductions		ards o	of the Interi	nal Revenu	e Service (IRS)	···
19A	Nation	Subpart A: Deductions nal Standards: food, clothing a nal Standards for Food, Clothing	under Standa and other items.	ards of	of the Interi	nal Revenue e "Total" amo ousehold size.	e Service (IRS)	
19A 19B	Nation is available is available is available in availabl	Subpart A: Deductions and Standards: food, clothing a sal Standards for Food, Clothing lable at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or the lable at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or for persons und sket Health Care for persons und sket Health Care for persons of set Health Care for persons of set Health Care for persons of set usdoj.gov/ust/ or from the clerk ousehold who are under 65 year nold who are 65 years of age or mber stated in Line 14b.) Multi 65, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older, and enter the result in Line cers 65 and older.	under Standa and other items. and Other Items from the clerk of ter in Line al bel ler 65 years of ag years of age or ol of the bankruptcy is of age, and ente older. (The total ply Line al by Line esult in Line c2.	Enter is for the bar low the ge, and lder. (Ty court er in Linumbe ine blee a 2 by	of the Interior Line 19A the applicable honkruptcy court amount from in Line a2 the Chis information.) Enter in Line b2 the numer of household to obtain a total Line b2 to ob	nal Revenue  e "Total" amo  puschold size.  .)  IRS National  IRS National  in is available  the b1 the numb  ther of membed  d members mu  al amount for I  tain a total am	e Service (IRS) unt from IRS (This information  Standards for Outstandards for Outstandards for Outstandards for Outstandards for your ist be the same as household members ount for household	\$ 961.00
	Nation is avai  Nation of-Poo of-Poo www. your h housel the nu under memb amoun	Subpart A: Deductions and Standards: food, clothing and Standards for Food, Clothing lable at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or the standards: health care. Entire the Health Care for persons und sket Health Care for persons 65 yusdoj.gov/ust/ or from the clerk ousehold who are under 65 year nold who are 65 years of age or mber stated in Line 14b.) Multi 65, and enter the result in Line of	under Standa and other items. and Other Items from the clerk of ter in Line al bel ler 65 years of ag years of age or ol of the bankruptcy is of age, and ente older. (The total ply Line al by Line esult in Line c2.	Enter is for the bar low the ge, and lder. (Ty court er in Linumbe ine b1 e a2 by Add L	of the Interior Line 19A the applicable had amount from in Line a2 the Chis information.) Enter in Line b2 the number of household to obtain a total Line b2 to obtaines c1 and c2	nal Revenue  e "Total" amo  puschold size.  .)  IRS National  IRS National  in is available  the b1 the numb  ther of membed  d members mu  al amount for I  tain a total am	e Service (IRS) unt from IRS (This information  Standards for Out- Standards for Out- at per of members of ers of your ast be the same as household members ount for household stal health care	,
	Nation is avai  Nation of-Poo of-Poo www. your h housel the nu under memb amoun	Subpart A: Deductions nal Standards: food, clothing a nal Standards for Food, Clothing lable at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or to nal Standards: health care. En sket Health Care for persons und sket Health Care for persons 65 y usdoj.gov/ust/ or from the clerk ousehold who are under 65 year nold who are 65 years of age or mber stated in Line 14b.) Multi 65, and enter the result in Line of ers 65 and older, and enter the re nt, and enter the result in Line 19	under Standa and other items. and Other Items from the clerk of ter in Line al bel ler 65 years of ag years of age or ol of the bankruptcy is of age, and ente older. (The total ply Line al by Line esult in Line c2.	Enter is for the bar low the ge, and lder. (Ty court er in Linumbe ine b1 e a2 by Add L	of the Interior Line 19A the applicable had amount from in Line a2 the Chis information.) Enter in Line b2 the number of household to obtain a total Line b2 to obtaines c1 and c2	nal Revenue  "Total" amo  busehold size.  "IRS National  IRS National  in is available  the b1 the numb  ber of member  d members mu  al amount for h  tain a total am  2 to obtain a to	e Service (IRS) unt from IRS (This information  Standards for Out- Standards for Out- at per of members of ers of your ast be the same as household members ount for household stal health care	,
	Natior is avai  Natior of-Poc of-Poc www. your h housel the nu under memb amour	Subpart A: Deductions nal Standards: food, clothing a nal Standards for Food, Clothing lable at www.usdoj.gov/ust/ or t nal Standards: health care. En eket Health Care for persons und eket Health Care for persons und eket Health Care for persons 65 y usdoj.gov/ust/ or from the clerk ousehold who are under 65 year nold who are 65 years of age or mber stated in Line 14b.) Multi 65, and enter the result in Line of ers 65 and older, and enter the re nt, and enter the result in Line 19 sehold members under 65 year	under Standa and other items. and Other Items from the clerk of ter in Line al bel ler 65 years of ag years of age or ol of the bankruptcy is of age, and entrolder. (The total ply Line al by Line 21. Multiply Line esult in Line c2. DB.	Enter is for the bar low the ge, and lder. (Ty court er in Linumbe ine blue a2 by Add L	of the Interior Line 19A the applicable had amount from in Line a2 the his information.) Enter in Line b2 the number of household to obtain a total Line b2 to obtain a calcade and calcad	nal Revenue  e "Total" amo  busehold size.  IRS National  IRS National  in is available  the b1 the numb  ther of membed  members mu  al amount for h  tain a total am  2 to obtain a to  ers 65 years of  ther member	e Service (IRS) unt from IRS (This information  Standards for Out- Standards for Out- at per of members of ers of your ast be the same as household members ount for household stal health care	,

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<u>B22A</u>	(Officia	l Form 22A) (Chapter 7) (01/08)			
20A	is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court).				
200	inform total o	Standards: housing and utilities; mortgage/rent expense. Ente lousing and Utilities Standards; mortgage/rent expense for your conation is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the buf the Average Monthly Payments for any debts secured by your how from Line a and enter the result in Line 20B. Do not enter an arms.	unty and household size (this ankruptcy court); enter on Line b the	\$514.00	
20B	a.	IRS Housing and Utilities Standards; mortgage/rental expense	\$1175		
	ь.	Average Monthly Payment for any debts secured by your home, if any, as stated in Line 42	\$0		
	c.	Net mortgage/rental expense	Subtract Line b from Line a.	\$1175.00	
21	Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A and 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for				
	Local	S44		\$0	
22A	Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.  December 2 or more.  If you checked 0, enter on Line 22A the "Public Transportation" amount from IRS Local Standards: Transportation. If you checked 1 or 2 or more, enter on Line 22A the "Operating Costs" amount from IRS Local Standards: Transportation for the applicable number of vehicles in the applicable Metropolitan Statistical Area or Census Region. (These amounts are available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptey court.)				
22B	Local Standards: transportation; additional public transportation expense. If you pay the operating expenses for a vehicle and also use public transportation, and you contend that you are entitled to an additional deduction for your public transportation expenses, enter on Line 22B the "Public Transportation" amount from IRS Local Standards: Transportation. (This amount is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.)				
23	Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)  Z 1				
	b.	Average Monthly Payment for any debts secured by Vehicle 1, as stated in Line 42	\$489		
	c.	Net ownership/lease expense for Vehicle 1	\$340		
	<u></u> _	The state of the s	Subtract Line b from Line a.	B149	

	Local check	Standards: transportation ownership/lease expense; Vehicle 2. ted the "2 or more" Box in Line 23.	Complete this Line only if you			
24	Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at <a href="www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 2, as stated in Line 42; subtract Line b from Line a and enter the result in Line 24. Do not enter an amount less than zero.					
	a.	IRS Transportation Standards, Ownership Costs	\$0			
	b.	Average Monthly Payment for any debts secured by Vehicle 2, as stated in Line 42	\$ 0			
	c.	Net ownership/lease expense for Vehicle 2	Subtract Line b from Line a.	\$0		
25	federa	r Necessary Expenses: taxes. Enter the total average monthly expensal, state and local taxes, other than real estate and sales taxes, such as social-security taxes, and Medicare taxes. Do not include real estates.	income taxes, self-employment	574.41		
26	payro	r Necessary Expenses: involuntary deductions for employment. Il deductions that are required for your employment, such as retirem costs. Do not include discretionary amounts, such as voluntar	ent contributions, union dues, and	\$ 1,132.95		
27	Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for					
28	Other Necessary Expenses: court-ordered payments. Enter the total monthly amount that you are required to pay pursuant to the order of a court or administrative agency, such as spousal or child support payments. Do not include payments on past due obligations included in Line 44.					
29	Other Necessary Expenses: education for employment or for a physically or mentally challenged child.					
30	Other Necessary Expenses: childcare. Enter the total average monthly amount that you actually expend on					
31	Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care that is required for the health and welfare of yourself or your dependents, that is not reimbursed by insurance or paid by a health savings account, and that is in excess of the amount entered in Line 19B. Do not include payments for health insurance or health savings accounts listed in Line 34.					
32	Other Necessary Expenses: telecommunication services. Enter the total average monthly amount that you actually pay for telecommunication services other than your basic home telephone and call phone services.					
33	Total	Expenses Allowed under IRS Standards. Enter the total of Lines	19 through 32.	\$ 4,936.36		
		Subpart B: Additional Living Expens	e Deductions			
		Note: Do not include any expenses that you ha	ve listed in Lines 19-32			

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	expense	Insurance, Disability Insurance, and Healt es in the categories set out in lines a-c below to dependents.				
	a.	Health Insurance	\$ 104.84			
34	b.	Disability Insurance	\$			
	c.	Health Savings Account	\$			
		nd enter on Line 34  do not actually expend this total amount, statelow:	ate your actual total average montl	nly expenditures in the	\$104.84	
.5	monthl elderly	used contributions to the care of household y expenses that you will continue to pay for the chronically ill, or disabled member of your he to pay for such expenses.	e reasonable and necessary care a	nd support of an	\$0	
36	Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.					
37	Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.					
38	you act second: with de	tion expenses for dependent children less the trually incur, not to exceed \$137.50 per child, for ary school by your dependent children less the ocumentation of your actual expenses, and yould already account	or attendance at a private or public in 18 years of age. You must prov you must explain why the amour	elementary or vide your case trustee	\$ 0	
39	Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at <a href="https://www.usdoj.gov/ust/">www.usdoj.gov/ust/</a> or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary.					
10		ued charitable contributions. Enter the amo financial instruments to a charitable organiza			\$0	
11	Total A	Additional Expense Deductions under § 707	(b). Enter the total of Lines 34 three	ough 40	\$104.84	

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322 <u>A (C</u>	<u> Ifficial</u>	Form 22A) (Chapte	or 7) (01/08)			
	Future payments on secured claims. For each of your debts that is secured by an interest in property that you own, list the name of the creditor, identify the property securing the debt, state the Average Monthly Payment, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the total of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the filing of the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter the total of the Average Monthly Payments on Line 42.					
42		Name of Creditor	Property Securing the Debt	Average Monthly Payment	Does payment include taxes or insurance?	
	a.	GMAC	2006 CHEVY EQUINOX	\$340.00	□ yes 🗗 no	
	b.			\$	☐ yes ☐ no	
	c.			\$	□ yes □ no	
				Total: Add Lines a, b and	с.	\$340.00
	you main addi	ay include in your de ition to the payments nt would include any nd total any such amo	or other property necessary for your seduction 1/60th of any amount (the "cus listed in Line 42, in order to maintain sums in default that must be paid in order to the following chart. If necessary	ure amount") that yn possession of the order to avoid repos	you must pay the credit property. The cure ssession or foreclosure.	tor
43		Name of Creditor	Property Securing the Debt	1/60th of th	he Cure Amount	
l	a.			\$		
	b.			\$		
	c.			\$		
				Total: Add I	Lines a, b and c	\$
44	as prio	ority tax, child suppor	priority claims. Enter the total amoun at and alimony claims, for which you verent obligations, such as those set ou	were liable at the ti	of all priority claims, su ime of your bankrates	s \$
	Chapt follow expens	ing chart, multiply th	ve expenses. If you are eligible to file a he amount in line a by the amount in li	a case under chapte ine b, and enter the	er 13, complete the resulting administrative	ve
	a.	Projected average i	monthly chapter 13 plan payment.	=·	\$	<b>]</b>   .
45	h Comment with the Comm					
	c.	- Average monthly a	administrative expense of chapter 13 ca	ase	Total: Multiply Lines a and b	\$
46	Total	Deductions for Deb	t Payment. Enter the total of Lines 42	through 45.		\$ 340.00
			Subpart D: Total Deduction	ns from Incom	ie	·
47	Total of all deductions allowed under § 707(b)(2). Enter the total of Lines 33, 41, and 46.					\$ 5381.20

	Part VI. DETERMINATION OF § 707(b)(2) PR	ESUMPTION			
48	Enter the amount from Line 18 (Current monthly income for § 707(b)(2))				
49	Enter the amount from Line 47 (Total of all deductions allowed under § 707(b)(2))				
50	Monthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48	and enter the result	\$ (295.78)		
51	60-month disposable income under § 707(b)(2). Multiply the amount in Line enter the result.	50 by the number 60 and	\$(17,746.80)		
	Initial presumption determination. Check the applicable box and proceed as directed.				
	The amount on Line 51 is less than \$6,575 Check the box for "The presum of this statement, and complete the verification in Part VIII. Do not complete the verification in Part VIII.		p of page 1		
52	The amount set forth on Line 51 is more than \$10,950. Check the box for page 1 of this statement, and complete the verification in Part VIII. You mather remainder of Part VI.				
	The amount on Line 51 is at least \$6,575, but not more than \$10,950. Co through 55).	mplete the remainder of Part	VI (Lines 53		
53	Enter the amount of your total non-priority unsecured debt		\$		
. 54	Threshold debt payment amount. Multiply the amount in Line 53 by the num	ber 0.25 and enter the result.	\$		
<b>55</b>	Secondary presumption determination. Check the applicable box and proceed as directed.  The amount on Line 51 is less than the amount on Line 54. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.  The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII.				
	Part VII: ADDITIONAL EXPENSE CL.	AIMS			
	Other Expenses. List and describe any monthly expenses, not otherwise stated and walfare of your and your family and that your contend should be an additional income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a segurage monthly expense for each item. Total the expenses.	i deduction from your curren	t monthly —		
56	Expense Description	Monthly Amount			
	b.	\$			
	0. C.	\$ : \$			
	Total: Add Lines a, b and c	\$	-   ·		
G (\$. U.)	Part VIII: VERIFICATION				
57	I declare under penalty of perjury that the information provided in this statemen both debtors must sign.)  Date: 3-26-08 Signature:	t is true and correct. (If this in	s a joint case,		
	Date: Signature: (Joi	nt Debtor, if any)	* ,		

Form B 21 Official Form 21 (12/03)

## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

#### STATEMENT OF SOCIAL SECURITY NUMBER(S)

I .Name of Debtor (enter Last, First. Middle)	: METTGER, PANDICE
(Check the appropriate box and, if applicable	le, provide the required information.)
Debtor Social Security Number is:	340-68-8705
Debtor does not have a Social Securi	ty Number.
2.Name of Joint Debtor (enter Last, First, Mi	iddle):
(Check the appropriate box and, if applicable	e, provide the required information.)
Joint Debtor Social Security Number	is:
Joint Debtor does not have a Social S	ecurity Number.
I declare under penalty of perjury that the for x Y Signature of Debtor	regoing is true and correct.  3-24-08  Date
Signature of Joint Debtor	Date

<sup>\*</sup>Joint debtors must Provide information for both spouses.

Penalty for making a false statement: Fine of up to \$250,000 or up to 5 years imprisonment or both. 18 U.S.C. §§ 152 and 3571.

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Official Form 1, Exhibit D (10/06)

#### UNITED STATES BANKRUPTCY COURT

	-	Northern	District of	Illinois	
In re_	MET 2 Debtor(	661, (PADDI	<u>Œ</u>	Case No	(if known)

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

√1. Within the 180 days before the filing of my bankruptcy case, I received a briefing
from a credit counseling agency approved by the United States trustee or bankruptcy
administrator that outlined the opportunities for available credit counseling and assisted me in
performing a related budget analysis, and I have a certificate from the agency describing the
services provided to me. Attach a copy of the certificate and a copy of any debt repayment plan
developed through the agency.

☐ 2. Within the 180 days before the filing of my bankruptcy case, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 15 days after your bankruptcy case is filed.

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Official Form 1, Exh. D (10/06) - Cont.

☐3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.] [Summarize exigent circumstances here.]
If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed.
□ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]  □ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);  □ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);  □ Active military duty in a military combat zone.
☐5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.
I certify under penalty of perjury that the information provided above is true and correct.
Signature of Debtor: Cauch Mitty

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Certificate Number: 03591-JLN-CC-003241163

### **CERTIFICATE OF COUNSELING**

I CERTIFY that on January 24, 2008	, at 4:36 o'clock PM CST ,
Candice Metzger	received from
Chestnut Health Systems, Inc.	
an agency approved pursuant to 11 U.S.C	C. § 111 to provide credit counseling in the
Northern District of Illinois	, an individual [or group] briefing that complied
with the provisions of 11 U.S.C. §§ 109(1	h) and 111.
A debt repayment plan was not prepared	If a debt repayment plan was prepared, a copy of
the debt repayment plan is attached to thi	is certificate.
This counseling session was conducted b	by telephone
Date: January 24, 2008	Name CHERYL D FOSTER
	Title CERTIFIED CREDIT COUNSELOR

<sup>\*</sup> Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. See 11 U.S.C. §§ 109(h) and 521(b).

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PAY RUN ID: TE20080216-0501271807

ADVICE NUMBER: 501271807

PAY PERIOD: 02/03/08-02/16/08

LANE/GRADE: L01 STEP: 02

1.Halloulladdabhadlladabhdddllaaallabd

03485 CKS &B 08052 - 0501271807 NNNN 0525100006002 X37181 A CANDICE L METZGER 10701 S TALMAN AVE CHICAGO IL 60655-1724



URS-AMOUNT/ADJ 6.25 217.76 3.75 1524.29 2.50 435.51		MAIL DROP/DEPT/JOB CODE: 001  TAXES/DEDUCTIONS/NET	24.52 9.25 3.42 8.70 6.52 34.00 477.39 212.17 23.90 46.11 3.53 0.45	98.08 37.00 13.68 8.70 6.52 137.64 4828.95 876.86 97.42 188.16 14.12
3.75 1524.29		Delta Dental Plan Employe Vision Plan Employee Healthcare Flexible Spend Dependent Care Account CPS Pension Plan Deferred Pay 38.6 Week Em Fed Withholdng S01 Fed MED/EE IL Withholdng 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	9.25 3.42 8.70 6.52 34.00 477.39 212.17 23.90 46.11 3.53 0.45 33.56	37.00 13.68 8.70 6.52 137.68 4828.95 876.86 97.42 188.16 14.12
		Delta Dental Plan Employe Vision Plan Employee Healthcare Flexible Spend Dependent Care Account CPS Pension Plan Deferred Pay 38.6 Week Em Fed Withholdng S01 Fed MED/EE IL Withholdng 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	9.25 3.42 8.70 6.52 34.00 477.39 212.17 23.90 46.11 3.53 0.45 33.56	13.68 8.70 6.52 137.64 4828.95 876.86 97.42 188.16 14.12 1.80
2.50 435.51		Vision Plan Employee Healthcare Flexible Spend Dependent Care Account CPS Pension Plan Deferred Pay 38.6 Week Em Fed Withholding S01 Fed MED/EE IL Withholding 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	3.42 8.70 6.52 34.00 477.39 212.17 23.90 46.11 3.53 0.45 33.56	8.70 6.52 137.64 4828.95 876.86 97.42 188.16 14.12 1.80
		Healthcare Flexible Spend Dependent Care Account CPS Pension Plan Deferred Pay 38.6 Week Em Fed Withholding S01 Fed MED/EE IL Withholding 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	8.70 6.52 34.00 477.39 212.17 23.90 46.11 3.53 0.45 33.56	8.70 6.52 137.64 4828.95 876.86 97.42 188.16 14.12 1.80
		Dependent Care Account CPS Pension Plan Deferred Pay 38.6 Week Em Fed Withholding S01 Fed MED/EE IL Withholding 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	6.52 34.00 477.39 212.17 23.90 46.11 3.53 0.45 33.56	6.52 137.64 4828.95 876.86 97.42 188.16 14.12
		CPS Pension Plan Deferred Pay 38.6 Week Em Fed Withholdng S01 Fed MED/EE IL Withholdng 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	34.00 477.39 212.17 23.90 46.11 3.53 0.45 33.56	137.64 4828.95 876.86 97.42 188.16 14.12
		Deferred Pay 38.6 Week Em Fed Withholding S01 Fed MED/EE IL Withholding 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	477.39 212.17 23.90 46.11 3.53 0.45 33.56	4828.95 876.86 97.42 188.16 14.12 1.80
		Fed Withholdng S01 Fed MED/EE IL Withholdng 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	212.17 23.90 46.11 3.53 0.45 33.56	876.86 97.42 188.16 14.12 1.80
		IL Withholdng 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	46.11 3.53 0.45 33.56	97.42 188.16 14.12 1.80
		Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues	3.53 0.45 33.56	188.16 14.12 1.80
		Dep/Spouse Life CTU Teacher Dues	3.53 0.45 33.56	14.12 1.80
		Dep/Spouse Life CTU Teacher Dues	0.45 33.56	1.80
		CTU Teacher Dues	33.56	
		Long Term Disability		
		any loan bisability	0.00	15.69
		CBOE Pension Contrib	119.01	481.76
	2 00	DATE OF THE PARTY		
0.00 VC2	0.00	cnecking ****428	88	1294.04
\$2,177.56		*** CURRENT NET PAY	\$1,294.04	
	0.00 VC2	0.00 VC2 0.00	0.00 PBD 3.00 PAYMENT DISTRIBUTION 0.00 VC2 0.00 Checking *****42	0.00 PBD 3.00 PAYMENT DISTRIBUTION



**CHICAGO PUBLIC SCHOOLS** P.O. BOX 09003 CHICAGO, ILLINOIS 60609

**CANDICE L METZGER** 

TO THE ORDER OF:

PAY

\$1,294.04

501271807

### POSIT - NON NEGOTIABLE SECURITY PEATONS INCLUDED:

**ADVICE** 

NUMBER

February 22, 2008

Case 08-07537

CHICAGO IL 60655-1724

Doc 1

Filed 03/28/08 Document

Entered 03/28/08 18:15:50 Desc Main

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CHICAGO PUBLIC SCHOOLS P.O. BOX 09003 CHICAGO, ILLINOIS 60609

DATE: November 30, 2007 PAY RUN ID: TE20071124-0500920937 ADVICE NUMBER: 500920937

PAY PERIOD: 11/11/07-11/24/07

LANE/GRADE: L01

STEP: 02

ldladhadlaabtaldaadlaadlaadlaandladd 03486 CKS 68 07332 - 0500920937 NNNN 332510000000 X37181 A CANDICE L METZGER 10701 S TALMAN AVE

EMPLOYEE ID: TIME CURRENT: OVERTIME:	000145800 62.50 0.30		The transfer of the same of the same	YTD TOTAL GROSS: \$45,095.87 YTD TAXABLE GROSS: \$37,659.63 MAIL DROP/DEPT/JOB CODE: 001		0049
POSITION/EARN TY	PEHOURS-AMO	A LDA\TNU	DJ. PP	TAXES/DEDUCTIONS/NET	CURRENT	YTD
134971/Holiday 134971/Reg Earns 134971/Sick Pay	18.75 37.50 6.25	628.14 1256.29 209.38		United Health HMO Employe Delta Dental Plan Employe Dependent Care Account CPS Pension Plan Deferred Pay 38.6 Week Em Aims Dental For Balances United Health HMO Emplopy Fed Withholding S01 Fed MED/EE IL Withholding 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues CTU Tea Agency	9.25 0.96 32.70 459.03 0.00	83.25 23.07 721.37 2913.92 37.00 472.68 4645.12 556.52 1062.57 41.36 10.80 382.44
BENEFIT DAYS SCK 15.50 VAC 0.00	SCP 0.00 VC1 0.00	2. 4	1.00	CBOE Pension Contrib  PAYMENT DISTRIBUTIONChecking *****428		2524.57  1256.71
*** CURRENT GROSS	PAY \$2,0	93.81		- 1	1,256.71	2200.71



CHICAGO PUBLIC SCHOOLS P.O. BOX 09003 CHICAGO, ILLINOIS 60609

MESSAGES: The CPS 2008 Benefits Open Enrollment - Begins N ov. 19, 2007 and Ends Dec. 7, 2007

ADVICE

NUMBER

500920937

November 30, 2007

**CANDICE L METZGER** 

TO THE ORDER OF:

PAY

\$1,256.71

# EPOSIT - NON NEGOTIABLE

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**CHICAGO PUBLIC SCHOOLS** P.O. BOX 09003 CHICAGO, ILLINOIS 60609

DATE: November 16, 2007 PAY RUN ID: TE20071110-0500872085 ADVICE NUMBER: 500872085

PAY PERIOD: 10/28/07-11/10/07

LANE/GRADE: L01

STEP: 02

6HallandadalalanHadalahisHaaaHajj,

03474 CKZ 48 07318 - 0500872085 NNNN 3185100002002 X37181 A CANDICE L METZGER 10701 S TALMAN AVE CHICAGO IL 60655-1724



EMPLOYEE ID: FIME CURRENT: DVERTIME:	000145800 62.50 0.00		s eller	YTD TOTAL GROSS: \$43,002.06 YTD TAXABLE GROSS: \$36,103.73 MAIL DROP/DEPT/JOB CODE: 001		0049
POSITION/EARN TY	PEHOURS-AMOU	TADJ. ~	-ADJ. PP	TAXES/DEDUCTIONS/NET	-CURRENT	YTD
134971/Prof Dev 134971/Reg Earns 134971/Sick Pay	43.75 1	418.76 465.67 209.38		United Health HMO Employe Delta Dental Plan Employe Dependent Care Account CPS Pension Plan Deferred Pay 38.6 Week Em Aims Dental For Balances United Health HMO Employy Fed Withholding S01 Fed MED/EE IL Withholding 01 Employee Supplemental Lif Dep/Spouse Life CTU Teacher Dues CTU Tea Agency	9.25 0.97 32.70 459.03 0.00 0.00 197.70 23.03 44.37	74.00 22.11 688.67 2454.89 37.00 472.68 4447.41 533.49 1018.20 39.60 10.35
BENEFIT DAYS SCK 16.50 VAC 0.00 *** CURRENT GROSS	SCP 0.00 VC1 0.00	PBD VC2	1.00 0.00	CBOE Pension Contrib  PAYMENT DISTRIBUTION Checking *****428  *** CURRENT NET PAY \$	<b>-</b>	



**CHICAGO PUBLIC SCHOOLS** P.O. BOX 09003 CHICAGO, ILLINOIS 60609

ov. 19, 2007 and Ends Dec. 7, 2007

November 16, 2007

PAY TO THE **CANDICE L METZGER** 

ORDER OF:

\$1,256.71

# EPOSIT - NON NEGOTIABLE

Case 08-07537

Document

Doc 1 Filed 03/28/08 Entered 03/28/08 18:15:50 Desc Main

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CHICAGO PUBLIC SCHOOLS P.O. BOX 09003 CHICAGO, ILLINOIS 60609

DATE: October 19, 2007

PAY RUN ID: TE20071013-0500778586 ADVICE NUMBER: 500778586

PAY PERIOD: 09/30/07-10/13/07 LANE/GRADE: L01

STEP: 02

03450 CKS 60 07290 - 0500778586 NNNN 2905100003002 X37181 A CANDICE L METZGER 10701 S TALMAN AVE CHICAGO IL 60655-1724



EMPLOYEE ID: YTD TOTAL GROSS: \$38,548.74 YTD TAXABLE GROSS: \$32,749.84 000145800 TIME CURRENT: 62.50 OVERTIME: MAIL DROP/DEPT/JOB CODE: 00123/23131/000049 POSITION/EARN TYPE---HOURS-AMOUNT/ADJ.--ADJ. PP TAXES/DEDUCTIONS/NET-----CURRENT-----YTD--134971/Holiday 6.25 209.38 United Health HMO Employe 215.82 134971/Reg Earns 56.25 1884.43 Delta Dental Plan Employe 9.25 55.50 Dependent Care Account 0.97 20.18 CPS Pension Plan 32.70 621.70 Deferred Pay 38.6 Week Em Aims Dental For Balances 1514.80 459.03 0.00 37.00 United Health HMO Emplopy 0.00 472.68 Fed Withholdng 197.70 4032.78 S01 Fed MED/EE 23.04 483.89 IL Withholding 44.37 924.50 Employee Supplemental Lif 1.76 36.08 Dep/Spouse Life 0.45 9.45 CTU Teacher Dues 31.87 286.83 CTU Tea Agency 0.00 382.44 CBOE Pension Contrib 114.43 2175.78 BENEFIT DAYS ---SCK 17.50 SCP 0.00 PBD 1.00 PAYMENT DISTRIBUTION-----VAC 0.00 VC1 0.00 VC2 0.00\*\*\*\*\*4288 Checking 1256.70



CHICAGO PUBLIC SCHOOLS P.O. BOX 09003 CHICAGO, ILLINOIS 60609

\$2,093.81

ADVICE

\*\*\* CURRENT NET PAY

500778586

\$1,256.70

October 19, 2007

CANDICE L METZGER

\*\*\* CURRENT GROSS PAY

MESSAGES: Teacher Regular Payroll 21

TO THE ORDER OF:

PAY

\$1,256.70

# F DEPOSIT - NON NEGOTIABLE